Customer No. 26308



**PATENT** 

### IN THE UNITED STATES PATERIES TRADEMARK OFFICE

In re application of:	Vandlik et al.	Attorney Docket No.:	1006.F-5489 CIP 2 CON
Serial No.:	10/765,498		Examiner: P. Bianco
Filed:	26 January 2004		Group Art Unit: 3761
For:	Blood Processing Systems Leukofilter	and Methods that En	nploy an In-Line Flexible
Mail Stop Amendmer Commissioner for Pa PO Box 1450 Alexandria, VA 22313	itents		
	AMENDMENT T	RANSMITTAL	
1. Transmitted he	erewith is an amendment for t	his application.	
	STAT	US	
2. Applicant is			
[ ] a small	entity		
[ x] other th	nan a small entity.		
Service on the date shown bel	CERTIFICATE OF MAIL (along with any referred to as being atta ow with sufficient postage as first class D Box 1450, Alexandria, VA 22313-145	ached or enclosed) is being dependent in an envelope addressed a	osited with the United State Postal as follows: Mail Stop Amendment,
Date: 31 July 2006	Li	Type or print name of perso Wender S. Wender (Signature of person mailing	ul

# **EXTENSION OF TERM**

NOTE:	"Extension of Time in Patent Cases (Supplement Amendments) - If a timely and complete response has been filed after Non-Final Office Action, an extension of time is not required to permit filing and/or entry of an additional amendment aft expiration of the shortened statutory period.				
	a Notic	e of Appea ely-filed res	l or filing and/or entry of an additional amendment a	ension of time is required toermit filing and/or entry of fter expiration of the shortened statutory period unless ce. Of course, if a Notice of Appeal has been filed within of December 10, 1985 (1061 O.G. 34-35).	
NOTE:	See 37 CFR 1.645 for extensions of time in interference proceedings and 37 CFR 1.550(c) for extensions of time reexamination proceedings.				
3.	The p	oroceedi	ngs herein are for a patent application a	and the provisions of 37 CFR 1.136 apply	
			(complete (a) or (b) as app	licable)	
	(a)	[ x]	Applicant petitions for an extension of 1.17(a)(1) - (a)(5)) for the total number	f time under 37 CFR 1.136 (fees: 37 CFR er of months checked below:	
	Exter	nsion	Fee for other than	Fee for	
	(mon		Small Entity	Small Entity	
[ ]		nonth	\$ 120.00 \$ 450.00	\$ 60.00 \$ 225.00	
[]		nonths months	\$ 450.00 \$1020.00	\$ 225.00 \$ 510.00	
ij		nonths	\$1590.00	\$ 795.00	
[x]	five m	nonths	\$2160.00	\$1080.00	
			Fee: \$ <u>2,160.00</u>		
	If an a	additiona	al extension of time is required please o	consider this a petition therefor.	
			(check and complete the next item	n, if applicable)	
	[]	theref	tension for months has or of \$ is deducted for sension now requested.	already been secured and the fee paid rom the total fee due for the total months	
		Exten	sion fee due with this request: \$		

OR

(b)

[]

Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

# **FEE FOR CLAIMS**

The fee for claims has been calculated as shown below: 4.

	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Additional Fee (Small Entity)	Additional Fee (Large Entity)
Total Claims 37 CFR 1.16(i)*	56	-56 =	0	x \$ 25.00	\$0	\$0
Independent Claims (37 CFR 1.16(h)***	3	-3 =	0	x \$ 100.00	\$0	\$0
First Presentation of Multiple Dependent claim(s) if any (37 CFR 1.16(j))				\$180.00	\$0	\$0
Total Additional Fee					\$0	\$0

If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20". If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

"After final rejection or action (S 1.113) amendments may be made cancelling claims or complying with any requirement of form which has been made." 37 CFR S 1.116(a) (emphasis added). WARNING:

(complete (c) or (d) as applicable)

	(c)	[x]	No additional fee for claims is required.
			OR
	(d)	[]	Total additional fee for claims required \$
			FEE PAYMENT
5.	[ x]	Attach	ed is a check in the sum of \$_2,340.00 (includes IDS)
	[]	Charge	e Account No the sum of \$

## **FEE DEFICIENCY**

NOTE:

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If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, (1065 O.G. 31-33).

6. [x] If any overpayment of fees or additional extension and/or fee is required, charge Account No. <u>06-2360</u>.

## AND/OR

[x]	If any overpayment of fees or additional fee for claims is required charge Account No.			
	06-2360	Will		
		SIGNATURE OF ATTORNEY		
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		TYPE OR PRINT NAME OF ATTORNEY		
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